## The National Park Service's State, Tribal, and Local Plans & Grants Environmental Screening Worksheet

This worksheet should be attached to all NEPA documentation and sent to Hampton Tucker, Chief, of State, Tribal, and Local Plans & Grants for final review. This worksheet shall be completed and signed by the SHPO/THPO office funding the project work the Categorical Exclusion Form (if applicable) will be reviewed and signed by Hampton Tucker.

A. PROJECT INFORMATION Project Name: Click here to enter text.
Grant Number: Click here to enter text.
Program Area:
□ Development □ Survey - Archeological
□OTHER(specify): Click here to enter text.
Project Address: Click here to enter text.  Project Originator/Coordinator: Click here to enter text.  Subgrantee/Owner: Click here to enter text.  National Register Status: Click here to enter text.
<b>B. PROJECT DESCRIPTION/LOCATION</b> [To begin the statutory compliance file, attach to this form, maps, sit visit notes, agency consultation, data, reports, categorical exclusion form (if applicable), or other relevant materials.
Click here to enter text.
Background Information is attached (if applicable) $\square \mathbf{Yes}$ $\square \mathbf{No}$
C. SECTION 106 REVIEW  Are historic resources affected (if yes must complete a Section 106 Review): □Yes□No  Define your Area of Potential Effect (APE): Click here to enter text.  Have all required tribal/public notification consultation steps been completed: □Yes□No  Section 106 maps & photographs are attached: □Yes □No
Section 106 Effects Determination:   No Effect   No Adverse Effect   Adverse Effect

If an Adverse Effect determination has been reached you must contact the National Park Service per the Programmatic Agreement for ESHPF funding AND no CE can be taken. Additionally, review Section E, Mandatory Criteria, if your project falls into any of these listed issues based on the above project information your project cannot claim an exclusion you must notify the National Park Service immediately to determine your next steps. For all other projects proceed with the Environmental Screening Form to determine IF a categorical exclusion can be taken.

## D. RESOURCE EFFECTS TO CONSIDER

Consider the context, duration and intensity of effects on resources.

Are any measurable impacts possible on the following physical, natural or cultural resources?

Yes? No? Data Needed to Determine?

1.	Geological resources – soils, bedrock, streambed	ds, etc.				
		☐ Yes [	□Data Needed			
2.	Air quality	☐ Yes	□No	☐Data Needed		
3.	Soundscapes	$\square$ Yes	$\square$ No	☐Data Needed		
4.	Water quality or quantity	☐ Yes	□No	☐Data Needed		
5.	Streamflow characteristics	$\square$ Yes	$\square$ No	☐Data Needed		
<mark>6.</mark>	Marine or estuarine resources	☐ Yes	□No	☐Data Needed		
7.	Floodplains or wetlands	☐ Yes	$\square$ No	☐Data Needed		
8.	8. Land use, including occupancy, income, type of use					
		☐ Yes	□No	☐Data Needed		
9.	Rare or unusual vegetation, old growth timber, r	•	_	_		
		☐ Yes	□No	☐Data Needed		
<u>10.</u>	Species of special concern (plant/animal/state or				g) or habitat	
	YY 1 X X 1 X X 1 X X X X X X X X X X X X	☐ Yes	□No	□Data Needed		
11.	Unique ecosystems, biosphere reserves, World I	•	□No	□Data Needed		
12	Unique or important wildlife or wildlife habitat	☐ Yes	□No □No	☐ Data Needed		
	Unique or important whome of whome habitat	□ Yes	□No	☐ Data Needed		
	Introduction/promotion of non-native species	□ Yes		☐ Data Needed		
	Recreation resources, including supply, demand					
13.	recreation resources, meruding suppry, demand	yisitatio  ☐ Yes		☐Data Needed		
16.	Socioeconomics, including employment, occupa				astructure	
	,,,,,,,,,,,,,,	☐ Yes		☐Data Needed		
17.	Minority and low-income populations, ethnogra					
		☐ Yes	□No	☐Data Needed		
18.	Energy resources	☐ Yes	□No	☐Data Needed		
19.	Other agency, or tribal, land use plans or policie	s□ Yes	□No	☐Data Needed		
<mark>20</mark> .	Resource, including energy, conservation potent	<mark>tial</mark>				
		☐ Yes	□No	☐Data Needed		

## E. MANDATORY CRITERIA: If implemented, would the proposal?

1.	Have material adverse effects on public health or safety	y?□ Yes		□No	□ Data Needed
2.	Have adverse effects on such unique characteristics as wilderness areas; wild or scenic rivers; national natural farmlands; wetlands; floodplains; or ecologically signi Register or Natural Landmarks?	l landmar ficant or c	ks; sole critical a	or princip	oal drinking water aquifers; prime uding those listed on the National
	register of Natural Landmarks.	TC3			vecueu
3.	Have highly controversial environmental effects?	□ Yes	□No	□Data N	Needed
4.	Have highly uncertain and potentially negative environ			involve u □Data N	_
5.	Establish a precedent for future action or represent a de environmental effects?			le about fi □Data N	
6.	Be directly related to other actions with individually in	_		ımulative □Data N	
7.	Have adverse effects on properties listed or eligible for	_		tional Re □Data N	•
8.	Have adverse effects on species listed or proposed to be adverse effects on designated Critical Habitat for these			st of Enda	angered or Threatened Species, or have
	I	□ Yes	□No	□Data N	Veeded
9.	Violate a federal law, or a state, local, or tribal law or i	-	-	sed for th □Data N	•
10.	Have a disproportionate, significant adverse effect on l			nority pop	
11.	Limit access to and ceremonial use of Indian sacred sit integrity of such sacred sites (EO 130007)?	•	_	_	•
12.	Contribute to the introduction, continued existence, or Control Act). Contribute to the introduction, continued may promote the introduction, growth or expansion of	l existence the range	e, or spre of nonr	ead of no	n- native invasive species or actions that asive species (EO 13112)?

\*\*\*If you check "YES" to any of the above listed criteria you cannot claim a CE and must complete either an EA or EIS for your project to proceed. Please notify the National Park Service immediately to determine your next steps.

Ple	ease answer the fo	llowing questions:	
1.		preparing this form familiar with the site, and/ol pages noting when site visit took place, staff a r text.	
2.		with all affected agencies or tribes been compleuding the name, date, and summary of comment text.	
SH	PO/THPO SIGNA	ATORY	
		nental impact information contained in the statu onmental documentation for the subject project	
Rec	commended Action	:Choose an item.	
□F	und Project	□Require Environmental Assessment	□Redirect Funding-Adverse Impact
	proved: PO/THPO		Date Click here to enter a date.

Type Name: Click here to enter text.

## **Categorical Exclusion Form**

State or Tribal Historic Preservation Office: Click here to enter text.				
NPS Grant Number:Click here to enter text.				
Project Name, Address, and Grant Number: Click here to enter text.				
Provide the category used to exclude action from further NEPA analysis: Choose an item.				
Describe any public or agency involvement effort conducted (reference the attached ESF):Click here to enter text.				
On the basis of the environmental impact information in the statutory compliance file, with which I am familiar, I am categorically excluding the described project from further NEPA analysis. No exceptional circumstances (i.e., all boxes in the ESF are marked "no") or conditions in section 3-6 apply, and the action is fully described in section 3-4 of DO-12.				
Chief, State, Tribal, and Local Plans & Grants Division				
Required Attachment: Signed Environmental Screening Worksheet				